

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 445632 FILING DATE 11/27/89
APPLICANT(S) NANKAI, S.

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	1					
3	1					
4	1					
5	1					
6	2					
7	2					
8	1					
9	2					
10	2					
11	1					
12	1					
13	1					
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15	1					
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TOTAL IND.	3					
TOTAL DEP.	21	↓	↓	↓		
TOTAL CLAIMS	24					

*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.
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TOTAL IND.				↓	↓	↓		
TOTAL DEP.								
TOTAL CLAIMS								

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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